## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000057860

Entity Name: BEAR PAW INTERNATIONAL, INC.

FILED Apr 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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21961 US HWY. 19N

CLEARWATER, FL 33765 US

Current Mailing Address: New Mailing Address:

21961 US HWY. 19 N

CLEARWATER, FL 33765 US

FEI Number: 59-3329751 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SWOPE, DAVID R. SWOPE, ANGELA
21961 US HWY. 19N
21961 US HWY. 19N
21961 US HWY. 19N
21961 US HWY. 19N

CLEARWATR, FL 33765 US CLEARWATR, FL 33765 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANGELA SWOPE 04/29/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 SWOPE, DAVID R
 Name:
 SWOPE, ANGELA D

 Address:
 21961 US HWY 19 N
 Address:
 21961 US HWY 19 N

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 CLEARWATER, FL 33765

Title: DP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SWOPE, ANGELA D
 Name:

 Address:
 21961 US HWY 19 N
 Address:

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELA SWOPE DP 04/29/2007